FREDERIC NURSING & REHABILITATION COMMUNITY

205 UNITED WAY

FREDERIC 54837 Phone: (715) 327-4297 Ownership: Limited Liability Company Operated from 1/1 To 12/31 Days of Operation: 365 Skilled Highest Level License: Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/05): 50 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/05): 50 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/05: 45 Average Daily Census: 46

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	왕		
Primary Diagnosis	%	Age Groups 	* 	 Less Than 1 Year 1 - 4 Years	37.8 46.7		
Developmental Disabilities	0.0	Under 65	2.2	More Than 4 Years	15.6		
Mental Illness (Org./Psy)	31.1	65 - 74	8.9				
Mental Illness (Other)	0.0	75 - 84	37.8		100.0		
Alcohol & Other Drug Abuse	0.0	85 - 94	35.6				
Para-, Quadra-, Hemiplegic	0.0	95 & Over	15.6	Full-Time Equivalent			
Cancer	2.2			Nursing Staff per 100 Resid	lents		
Fractures	6.7		100.0	(12/31/05)			
Cardiovascular	17.8	65 & Over	97.8				
Cerebrovascular	2.2			RNs	8.9		
Diabetes	0.0	Gender	8	LPNs	11.3		
Respiratory	8.9			Nursing Assistants,			
Other Medical Conditions	31.1	Male	22.2	Aides, & Orderlies	40.1		
		Female	77.8	İ			
	100.0	İ		İ			
		İ	100.0	İ			

Method of Reimbursement

		edicare			edicaid itle 19		Other			Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of	
Int. Skilled Care	0	0.0	0	1	3.6	157	0	0.0	0	1	7.7	171	0	0.0	0	0	0.0	0	2	4.4	
Skilled Care	4	100.0	345	24	85.7	134	0	0.0	0	9	69.2	158	0	0.0	0	0	0.0	0	37	82.2	
Intermediate				3	10.7	112	0	0.0	0	3	23.1	139	0	0.0	0	0	0.0	0	6	13.3	
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	4	100.0		28	100.0		0	0.0		13	100.0		0	0.0		0	0.0		45	100.0	

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Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	10.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	3.8	Bathing	0.0		77.8	22.2	45
Other Nursing Homes	10.0	Dressing	17.8		62.2	20.0	45
Acute Care Hospitals	75.0	Transferring	33.3		44.4	22.2	45
Psych. HospMR/DD Facilities	0.0	Toilet Use	26.7		42.2	31.1	45
Rehabilitation Hospitals	1.3	Eating	73.3		17.8	8.9	45
Other Locations	0.0	******	* * * * * * * * * * * * * * *	*****	******	******	*****
Total Number of Admissions	80	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	15.6	Receiving Resp	iratory Care	11.1
Private Home/No Home Health	28.4	Occ/Freq. Incontiner	nt of Bladder	48.9	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	9.9	Occ/Freq. Incontine	nt of Bowel	31.1	Receiving Suct	ioning	0.0
Other Nursing Homes	3.7	į			Receiving Osto	my Care	0.0
Acute Care Hospitals	18.5	Mobility			Receiving Tube	- Feeding	0.0
Psych. HospMR/DD Facilities	2.5	Physically Restraine	ed	2.2	_	anically Altered Diets	8.9
Rehabilitation Hospitals	0.0	İ			5	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	30.9	With Pressure Sores		11.1	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	81			- / -	Receiving Psyc	hoactive Drugs	51.1

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

*************	******	*****	*****	*****	*****	*****	*****	*****	*****
		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Pro	prietary	50	-99	Ski	lled	Al	
	Facility		Group		Group		Group		lities
	%	%	Ratio	%	Ratio	ે	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.0	82.2	1.12	86.9	1.06	86.0	1.07	88.1	1.04
Current Residents from In-County	71.1	71.1	1.00	73.2	0.97	74.9	0.95	77.6	0.92
Admissions from In-County, Still Residing	15.0	17.9	0.84	20.6	0.73	19.6	0.76	18.1	0.83
Admissions/Average Daily Census	173.9	152.6	1.14	123.3	1.41	139.3	1.25	162.3	1.07
Discharges/Average Daily Census	176.1	153.4	1.15	123.8	1.42	139.6	1.26	165.1	1.07
Discharges To Private Residence/Average Daily Census	67.4	75.7	0.89	53.9	1.25	64.3	1.05	74.8	0.90
Residents Receiving Skilled Care	86.7	95.4	0.91	96.4	0.90	96.4	0.90	92.1	0.94
Residents Aged 65 and Older	97.8	94.2	1.04	93.0	1.05	92.9	1.05	88.4	1.11
Title 19 (Medicaid) Funded Residents	62.2	72.3	0.86	69.6	0.89	69.8	0.89	65.3	0.95
Private Pay Funded Residents	28.9	16.4	1.76	20.3	1.42	19.0	1.52	20.2	1.43
Developmentally Disabled Residents	0.0	0.8	0.00	0.7	0.00	0.7	0.00	5.0	0.00
Mentally Ill Residents	31.1	28.0	1.11	37.2	0.84	34.7	0.90	32.9	0.95
General Medical Service Residents	31.1	26.7	1.16	19.6	1.59	21.9	1.42	22.8	1.37
Impaired ADL (Mean)	45.8	46.8	0.98	46.7	0.98	47.4	0.97	49.2	0.93
Psychological Problems	51.1	55.5	0.92	57.3	0.89	59.0	0.87	58.5	0.87
Nursing Care Required (Mean)	3.9	6.9	0.56	6.7	0.58	7.2	0.54	7.4	0.52